

WAIMATE HIGH SCHOOL/SCD

TRAVEL CLAIM PAYMENT AND TRAVEL ASSISTANCE PAYMENT FORM

Date 14-15_March_2011

Name _____

Address _____

School _____

Travelling to Hokitika

Reason for Travel SCD professional Development

Distance travelled _____ km

Are you receiving any other travel reimbursement?

Yes

☐

No

☐

Comments _____

Approved _____ Date _____

Payment _____

Paid _____ Date _____

Note: Payments are made at the following rates: cars; annual kms on official business, 0-1600 :**62c per km**, over 1600kms **47c per km**. Motorcycles: 0 to 6400 kms **20c per km**, over 6400 km, **17c per km**.